

**Testimony in Support of
H.B. No. 5147 (RAISED) AN ACT CONCERNING
PHYSICIAN ASSISTANTS AND THE PALLIATIVE USE OF MARIJUANA**

February 21, 2022

To the Honorable Representative Michael D'Agostino, the Honorable Senator James Maroney, and other esteemed members of the General Law Committee,

I offer this testimony in support of H.B. 5147 (RAISED) AN ACT CONCERNING PHYSICIAN ASSISTANTS AND THE PALLIATIVE USE OF MARIJUANA.

According to national survey data from 2019, there are nearly 400 CT PAs that serve as primary care providers (PCP) for CT residents.¹ Considering an average PCP panel includes up to 1800 patients/year, this amounts to up to 25% of the 2.8 million CT adults that may be receiving their primary care from Physician Assistants.

These CT Residents are treated and diagnosed by PA PCP's whose scope of practice includes the ability to diagnose many of the debilitating medical conditions included in the existing CT Palliative Use of Marijuana statute, Chapter 420f, Section 21a-408. However, since Public Act No. 12-55, An Act Concerning the Palliative Use of Marijuana, was signed into law on May 31, 2012, the same CT patients whose PCPs are PAs have been denied access to this care by their PCP simply because PAs have not been included in this law.

Due to the current CT statute mentioned above, CT residents whose PCP's are PAs have less access to care, higher access to care burdens and higher care costs associated to this statute. These excess burdens include the additional time, money and effort to see a non-PA provider who doesn't know them and the additional stress as some patients are forced to choose more dangerous and less monitored options. Over the years, I have had several patients in this situation. These patients feel the current CT statute to be an unfair and undue burden on them during the most vulnerable periods of their lives.

I join the leadership of the CT Academy of PAs in support to eliminate this unintentional barrier to care for CT residents whose Primary Care Providers are PAs. By including PAs along with other PCPs, namely physicians and nurse practitioners, this would allow all CT residents the equal opportunity under the law to allow their own PCP to certify them as having a medical condition that qualifies for the medical cannabis program. PAs diagnose many of the medical conditions listed in Chapter 420f, Section 21a-408, which are conditions as part of their current scope of practice, and can certify these conditions for a number of other programs and benefits besides the Palliative Use of Marijuana.

As a CT PA who has worked in Internal Medicine for over 20 years including as a Primary Care Provider, I fully support H.B. No. 5147 (RAISED) and appreciate your help to eliminate the unnecessary care barriers to CT residents whose PCPs are PAs. These CT patients deserve the same access care as patients of other CT care providers.

Respectfully,



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¹2019 National Commission on the Certification of Physician Assistants: Statistical Profile of Certified Physician Assistants.
https://www.nccpa.net/wp-content/uploads/2020/11/2019-Recently-Certified-Report-final_compressed.pdf